## PART B - FEE(S) TRANSMITTAL

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maintenance tec notific		-			and or (b) mareating a sep	mate 11th ADDRESS 10
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address 7590   11/25/2008			) No Fed paj hav	Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission.		
Thomas E. Kc FAY, SHARPE Seventh Floor 1100 Superior A	ovsky, Jr. , FAGAN, MINNIC		l h Sta adc electronicly trai	Certificate nf Mailing or Transmissinn  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facinity transmitted to the USPTO (671) 273-2833, on the date indicated below.		
Cleeland, OH 44114-2518				Hilary Mc	NULTY	(Depositor's name)
				Hilary m	Multy	(Signature)
,				February .	24, 2009	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/634,684	08/05/2003		Thaddeus J. Miclnik		MEDZ 2 01312	7138
TITLE OF INVENTION	I: DECONTAMINATIO	N SYSTEM FOR MAIL	AND OTHER ARTICLES	<b>;</b>		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE I	TEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	02/25/2009
EXAM	INER	ART UNIT	CLASS-SUBCLASS	]		
JOYNER, KEVIN		1797	422-028000	J		
Change of cnrresponde CFR 1.363).      Change of corresp Address form PTO/SI      "Fee Address" ind.	ondence address (or Cha 3/122) attached.	nge of Correspondence	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attor listed, no name will be	meys or agents. If no printed.	name is 3	
	ess an assignee is identi n in 37 CFR 3.11. Comp		THE PATENT (print or typedata will appear on the part a substitute for filing and  (B) RESIDENCE: (CITY)	atent. If an assignee assignment.	is identified below, the do	ocument has been filed for
AMERICAN STERILIZER COMPANY Mentor, Ohio US						
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) a  Substitution fee (Note 1)		4b ermitted)	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Ferm PTO 2038 is attached. Via EFS Web  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-0308 (enclose an extra copy of this form).			
5. Change in Entity Stat		above)				
a. Applicant claims	SMALL ENTITY status	s. See 37 CFR 1.27.	b. Applicant is no long	er claiming SMALL	ENTITY status. See 37 CF	R 1.27(g)(2).
interest as shown by the re	cords of the United State	es Parent and Fredermark	Office other than the	e applicant; a register	red attorney or agent; or the	assignee or other party in
Authorized Signature Manual Bellion Date 24 Feb 2009						
Typed or printed name	Thomas E. Ko	COVSKY,Jr		Registration No.	28,383	
-			n is required to obtain or re 14. This objection is esting depending upon the individual Chief Information Officer OMPLETED FORMS TO	tain a benefit by the p nated to take 12 min lual case. Any comm , U.S. Patent and Tra THIS ADDRESS. SI	public which is to file (and I tes to complete, including tents on the amount of time demark Office, U.S. Depar END TO: Commissioner fo	by the USPTO to process) gathering, preparing, and e you require to complete tment of Commerce, P.O. r Patents, P.O. Box 1450,